

b Employer's Identification number c Employer's name, address, and ZIP code		20-2724149 NUOVO SOLUTIONS LLC 100 CROSSWAYS PARK DR W SUITE 111 WOODBURY NY 11797		12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
				\$	62807.21	10351.47
				12b	3 Social security wages	4 Social security tax withheld
				\$	62807.21	3894.05
				12c	5 Medicare wages and tips	6 Medicare tax withheld
				\$	62807.21	910.70
				12d	7 Social security tips	8 Allocated tips
				\$		
e Employee's first name and initial Last name		2775213 HARI KRISHNA DARAPANANI 8367 STONYBRIDGE CIR HIGHLANDS RANCH CO 80126		This information is being furnished to the Internal Revenue Service Copy B To Be Filed with Employee's FEDERAL Tax Return	9 Verification code	10 Dependent care benefits
					11 Nonqualified plans	13 Statutory employee Retirement plan Third-party sick pay
					14 Other	
f Employee's address and ZIP code				a Employee's soc. sec. no.	681-70-2969	
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	29944467	62807.21	2829.00	63942.17	16.00	GREENW

Form W-2 Wage and Tax Statement 2018 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy B To Be Filed With Employee's FEDERAL Tax Return

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e Employee's first name and initial Last name		2775213 HARI KRISHNA DARAPANANI 8367 STONYBRIDGE CIR HIGHLANDS RANCH CO 80126		Copy 2 for State, City, or Local Tax Departments	9 Verification code	10 Dependent care benefits
					11 Nonqualified plans	13 Statutory employee Retirement plan Third-party sick pay
					14 Other	
f Employee's address and ZIP code				a Employee's soc. sec. no.	681-70-2969	
15 State	Employer's state I.D. No.	16 State wages, tips, etc.	17 State income tax	18 Local wages, tips, etc.	19 Local income tax	20 Locality name
CO	29944467	62807.21	2829.00	63942.17	16.00	GREENW

Form W-2 Wage and Tax Statement 2018 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments

REV 01/23/19 OSP

b Employer's Identification number c Employer's name, address, and ZIP code		20-2724149 NUOVO SOLUTIONS LLC 100 CROSSWAYS PARK DR W SUITE 111 WOODBURY NY 11797		12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
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Form W-2 Wage and Tax Statement 2018 Department of the Treasury-Internal Revenue Service OMB # 1545-0008 Copy 2 To Be Filed With Employee's STATE, CITY, or LOCAL Tax Departments

b Employer's Identification number c Employer's name, address, and ZIP code		20-2724149 NUOVO SOLUTIONS LLC 100 CROSSWAYS PARK DR W SUITE 111 WOODBURY NY 11797		12a See instructions for Box 12	1 Wages, tips, other compensation	2 Federal income tax withheld
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				\$		
e Employee's first name and initial Last name		2775213 HARI KRISHNA DARAPANANI 8367 STONYBRIDGE CIR HIGHLANDS RANCH CO 80126		This information is being furnished to the Internal Revenue Service. If you are required to file a tax return, a negligence penalty or other sanction may be imposed on you if this income is taxable and you fail to report it. Copy C for Employee's Records (see notice to Employee on back.)	9 Verification code	10 Dependent care benefits
					11 Nonqualified plans	13 Statutory employee Retirement plan Third-party sick pay
					14 Other	
f Employee's address and ZIP code				a Employee's soc. sec. no.	681-70-2969	
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